

INDIVIDUAL CONTRACTING ACTION REPORT

REPORT CONTROL SYMBOL

PART A		A1. TYPE OF REPORT 0 Original 1 Cancelling 2 Correcting		A2. REPORT NO.		A3. CONTRACTING OFFICE CODE		A4. NAME OF CONTRACTING OFFICE									
PART B		B1. CONTRACT NUMBER				B2. MOD. ORDER OR OTHER ID NUMBER				B3. ACTION DATE (YYMMDD)		B4. COMPLETION DATE (YYMMDD)					
B5. CONTRACTOR IDENTIFICATION INFORMATION						B5A. ESTABLISHMENT CODE				B5B. CAGE CODE							
B5C. CONTRACTOR NAME AND DIVISION NAME						B5D. CONTRACTOR ADDRESS (Street, City, State, Zip Code)											
B5E. TIN				B5F. PARENT TIN				B5G. PARENT NAME									
B6. PRINCIPAL PLACE OF PERFORMANCE		B6A. CITY OR PLACE CODE		B6B. STATE OR COUNTRY CODE		B6C. CITY OR PLACE / STATE OR COUNTRY NAME											
B7. TYPE OBLIGATION 1 Obligation 2 Deobligation		B8. TOTAL DOLLARS (Enter whole dollars only)		B9. FOREIGN MILITARY SALE Y Yes N No		B10. MULTYEAR CONTRACT Y Yes N No		B11. TOTAL MULTYEAR VALUE (Enter whole dollars only)									
B12. PRINCIPAL PRODUCT OR SERVICE		B12A. FSC OR SVC CODE		B12B. DOD CLAIMANT PROG. NO.		B12C. SYSTEM OR EQUIP CODE		B12D. SIC CODE		B12E. NAME / DESCRIPTION							
B13. KIND OF CONTRACTING ACTION												MODIFICATION					
1 Initial Letter Contract 2 Definitive Contract 3 Superseding Letter Contract 4 Definitive Contract 5 Order Under DoD BOA				5 Order Under DoD Contract 6 Order/Modification Under Federal Schedule 7 Order Under Another Agency's Contract 8 Action With Another Federal Agency 9 Small Purchase Procedure				A Additional Work (new agreement) B Additional Work (other) C Funding Action D Change Order E Termination for Default F Termination for Convenience G Cancellation									
PART C (Do Not Complete This Part If Item B9 Above is Coded Y or If Item B13 is Coded 8)																	
C1. SYNOPSIS Y Yes N No		C2. REASON NOT SYNOPSIS A Urgency B Other than Urgency		C3. EXTENT COMPETED A Competed B Not Available for Competition C Follow on to Completed Action D Not Completed		C4. SEA TRANSPORTATION Y Yes - Positive Response to DFARS 252.247-7202 N No - Negative Response to DFARS 252.247-7202 U Unknown - No Response or Clause Not Included in Solicitation											
C5. TYPE OF CONTRACT A Fixed Price Redetermination J Firm Fixed Price K Fixed Price Economic Price Adjustment				L Fixed Price Incentive R Cost Plus Award Fee S Cost Contract T Cost Sharing				U Cost Plus Fixed Fee V CIPF Y Time and Materials Z Labor Hours				C6. NUMBER OF OFFERORS SOLICITED 1 One 2 More than one		C7. NUMBER OF OFFERS RECEIVED 1 One 2 More than one			
C8. SOLICITATION PROCEDURES A Full & Open Competition - Sealed Bid B Full & Open Competition - Competitive Proposal C Full & Open Competition - Combination D Architect - Engineer E Basic Research F Multiple Award Schedule				G Alternate Source - Reduced Cost H Alternate Source - Mobilization J Alternate Source - Eng/R&D K Set Aside M Otherwise Authorized by Statute N Other than Full & Open Competition				C9. AUTHORITY FOR OTHER THAN FULL & OPEN COMPETITION 1A Unique Source 1B Follow-on Contract 1C Unsolicited Research Prop 1D Patent/Data Rights 1E Utilities 1F Standardization 1G Only One Source - Other 2A Urgency 3A Mobilization 3B Essential R & D Capability 4A International Agreement 5A Authorized by Statute 5B Authorized Resale 6A National Security 7A Public Interest									
C10. SUBJECT TO LABOR STANDARDS STATUTES A Walsh - Healey Act, Manufacturer B Walsh - Healey Act, Dealer				C Service Contract Act D Davis - Bacon Act Z Not Subject to Above				C11. CERTIFIED COST OR PRICING DATA Y Yes, Obtained N No, Not Obtained W Not Obtained, Waived				C12. CONTRACT FINANCING (Progress Payments (PP) or Advance Payments (AP)) A DFARS Clause 252.232-7007 or FAR Clause 52.232-16 B DFARS Clause 252.232-7004 C Percentage of Completion PP D Unusual PP or AP Z None of the Above					
C13. FOREIGN TRADE DATA		C13A. NUMBER OF OFFERORS		C13B. BUY AMERICAN ACT PERCENT DIFFERENCE				C13C. PLACE OF MANUFACTURE A U.S. B FOREIGN				C13D. COUNTRY OF ORIGIN CODE					
PART D (Do Not Complete This Part If Item B9 Above is Coded Y or If Item B13 is Coded 6 or 8)																	
D1. TYPE OF BUSINESS (Make one selection) A Small Disadvantaged Business Performing in U.S. B Other Small Business Performing in U.S. C Large Business Performing in U.S. D Workshop for the Blind or Other Severely Handicapped F Hospital				L Foreign Concern/Entity M Domestic Firm Performing Outside U.S. N Historically Black Colleges & Universities or Minority Institutions (HBCU/MI) P Other Educational Z Other Nonprofit				D2. REASON NOT AWARDED TO SMALL DISADVANTAGED BUSINESS (SDB) A No Known SDB Source B SDB Not Solicited C SDB Solicited, No Offer D SDB Solicited, Offer Not Low Z Other Reason				D3. REASON NOT AWARDED TO SMALL BUSINESS (SB) A No Known SB Source B SB Not Solicited C SB Solicited, No Offer D SB Solicited, Offer Not Low Z Other Reason					
D4. PREFERENCE PROGRAM		D4A. TYPE OF SB SET-ASIDE A None B Total SB C Partial SB Set-Aside D Combined SB / Labor Surplus Area Set-Aside E Total SDB Set-Aside		Y Small Emerging Business Set- Aside Z Small Business- Small Purchase Set-Aside		D4B. TYPE OF SDB SET-ASIDE/SDB PREFERENCE A None B Section 8(A) C Total SDB Set-Aside D SDB Evaluation Preference- Unrestricted		E SDB Preferential Consideration- Partial SB Set- Aside		D4C. HBCU/MI SET-ASIDE A None B HBCU or MI - Total Set- Aside C HBCU or MI - Partial Set- Aside		D4D. OTHER PREFERENCE PROGRAM A Directed to Workshops B Partial Labor Surplus Area (LSA) Set-Aside C Tie-Bid LSA Preference Z None of the Above		D4E. PREMIUM PERCENT			
D5. ETHNIC GROUP A Asian-Indian American B Asian-Pacific American C Black American D Hispanic American E Native American F Other Certified Z No Repre- sentation				D6. WOMEN - OWNED SMALL BUSINESS Y Yes N No U Uncertified		D7. SMALL BUSINESS INNOVATION RESEARCH (SBIR) PROGRAM A Not a SBIR Phase I / II B SBIR Program Phase I Action C SBIR Program Phase II Action				D8. SUBCONTRACTING PLAN - SB, SDB, OR HBCU/MI A Plan Not Included - No Subcontracting Possibilities B Plan Not Required C Plan Required, Incentive Not Included D Plan Required, Incentive Included							
D9. DEMONSTRATION TEST PROGRAM Y Yes N No		D10. SIZE OF SMALL BUSINESS NUMBER OF EMPLOYEES or AVERAGE ANNUAL GROSS REVENUE A 50 or Less B 51 - 100 C 101 - 250 D 251 - 500 E 501 - 750 F 751 - 1,000 G Over 1,000 M 1,000,000 or Less N 1,000,001 - 2,000,000 P 2,000,001 - 3,500,000 R 3,500,001 - 5,000,000 S 5,000,001 - 10,000,000 T 10,000,001 - 17,000,000 U Over 17,000,000				D11. EMERGING SMALL BUSINESS Y Yes N No											
PART E		E1		E2		E3		E4		E5		E6		E7		E8	
PART F		F1. NAME OF CONTRACTING OFFICER OR REPRESENTATIVE				F2. SIGNATURE				F3. TELEPHONE NO.				F4. DATE (YYMMDD)			